

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Roger Niello for Senate 2022			Date of This Filing <u>11/04/2022</u>	Date Stamp Page 1 of 3	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916)838-5799	I.D. NUMBER (if applicable) 1443871		Report No. <u>221104.06</u>		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY West Sacramento	STATE CA	ZIP CODE 95691	No. of Pages <u>3</u>		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/04/2022	New Majority PAC San Rafael, CA 94901 ID# 992074	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,900.00
11/04/2022	UnitedHealth Group Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
11/04/2022	Harbor Distributing, LLC(Lara Dunbar) Huntington Beach, CA 92647	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00

*Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment:

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NAME OF FILER Roger Niello for Senate 2022			Date of This Filing <u>11/04/2022</u>	Date Stamp Page 2 of 3	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;"> CALIFORNIA FORM 497 </div> For Official Use Only
AREA CODE/PHONE NUMBER (916)838-5799	I.D. NUMBER (if applicable) 1443871	Report No. <u>221104.06</u>			
STREET ADDRESS					
CITY West Sacramento	STATE CA	ZIP CODE 95691			
			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
			No. of Pages <u>3</u>		

Late Contribution(s) Received

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11/04/2022	The Travelers Indemnity Company Hartford, CT 06183	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
11/04/2022	Ramco Properties, LP West Sacramento, CA 95691	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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AREA CODE/PHONE NUMBER (916)838-5799	I.D. NUMBER (if applicable) 1443871		Report No. 221104.06		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY West Sacramento	STATE CA	ZIP CODE 95691	No. of Pages 3		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: